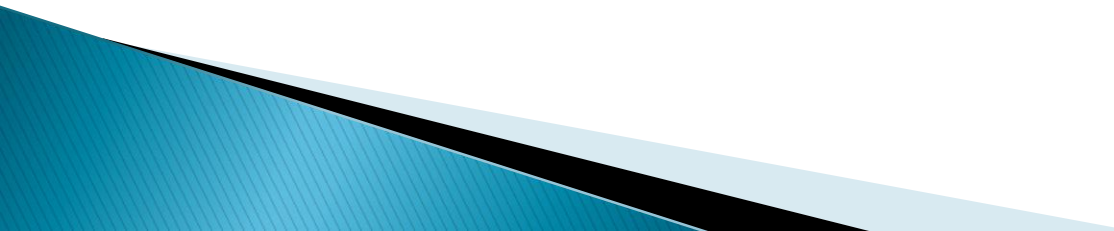


# MCA SEMINAR

## October 24, 2011

### MCA EVALUATION TOOL

# MCA EVALUATION TOOL

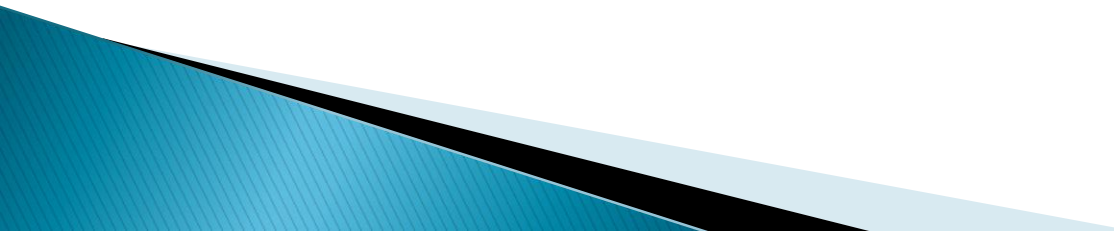
- ▶ Department identified need to develop an evaluation tool. MCAs were:
    - Not familiar with MCAs role
    - Not meeting regularly
    - Did not have correct membership
    - Not conducting quality review
    - Not having a Medical Director or an engaged Medical Director
    - Implementing protocols that were not approved
    - Hospital administrators not understanding what an MCA was and the roles/responsibilities of the MCA.
- 

# MCA EVALUATION TOOL

- ▶ MCA Subcommittee of the EMSCC
  - Draft document was prepared for review by the MCA Subcommittee.
  - MCA Subcommittee reviewed document prior to submission to the EMSCC
- ▶ EMSCC – September 30, 2011
  - Supported use of document to evaluate MCAs

# MCA EVALUATION TOOL

## ► Contents:

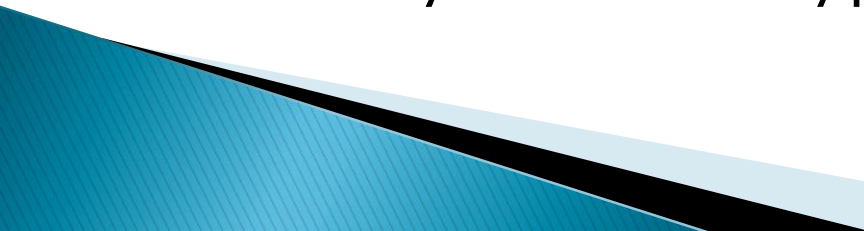
- MCA Designation and Organization
  - Medical Director
  - Granting of Medical Control, Due Process
  - Protocol Development
  - Quality Improvement and PSRO
  - Pharmacy
  - Communication Systems
  - Participation in related community activities
- 

# MCA EVALUATION TOOL

- ▶ All questions are based upon:
  - Administrative Rules
  - Statutory Language


# MCA EVALUATION TOOL

## MCA Designation and Organization:

- ▶ Has your MCA received written approval from the Department for any changes in geographic area of responsibility since the initial designation?
  - ▶ MCA's are to be administered by the participating hospitals in the MCA region. Does your MCA administration include all hospitals within the region that operate a facility for treating emergency patients? Name those facilities.
  - ▶ If not all hospitals participate, have all been invited to participate in the planning and development activities of the MCA?
  - ▶ Does your MCA region contain any freestanding surgical facilities (FSOFs), licensed under Part 208 of the Public Health Code? Are they participating in the administration of the MCA?
  - ▶ What are the “applicable standards” established to allow participation in the MCA by FSOFs? Are they part of the MCA protocols?
- 

# MCA EVALUATION TOOL

## MCA Designation and Organization:

- ▶ When were your MCA bylaws last reviewed or revised?
  - ▶ Describe the organizational structure of your MCA.
  - ▶ Describe the MCA “Board”. Is a majority voting position on the Board held by representatives of hospitals and/or freestanding surgical facilities? Provide a list of Board members and who they represent.
  - ▶ Who appoints hospital / FSOF representatives to your MCA Board?
  - ▶ How do those representatives participate in your MCA administration? (Meeting attendance, etc.)
  - ▶ Are the hospital / FSOF representatives vested with decision-making authority that allows them to speak for their hospital?
  - ▶ If the hospital / FSOF representative is not the CEO of the facility, how does the CEO stay informed of MCA decisions and actions?
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# MCA EVALUATION TOOL

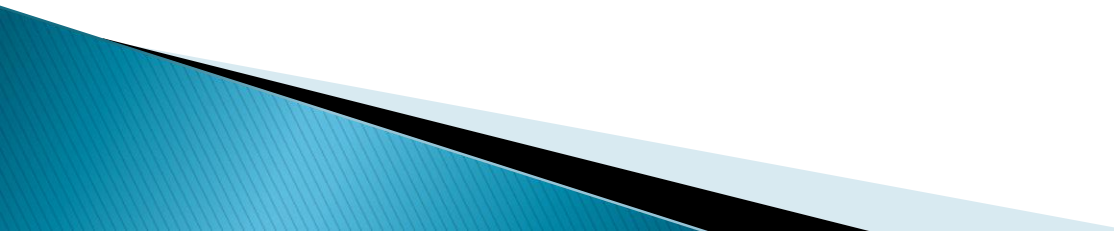
## MCA Designation and Organization:

- ▶ Has the MCA appointed an “Advisory Body”?
- ▶ Does the Advisory Body membership meet the requirements of Section 20918 ?
- ▶ Does the Advisory Body meet at least quarterly?
- ▶ How does the Advisory Body communicate its advice to the MCA, Medical Director, and Life Support Agency lead administrator? (Written minutes or other documents, etc.)
- ▶ Does the Board also function as the “Advisory Body”?
  - If so, do hospitals still retain a voting majority on the Board?



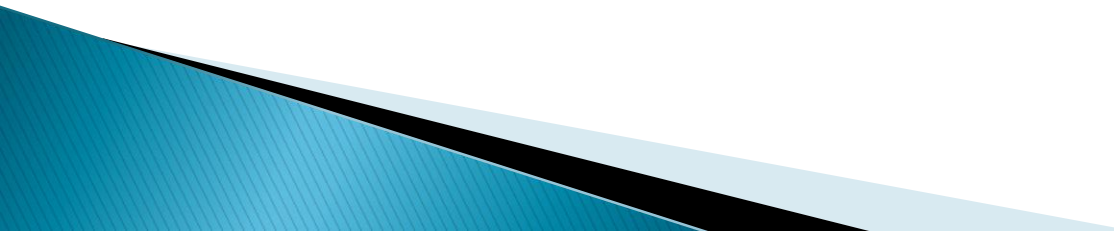
# MCA EVALUATION TOOL

## Medical Director:

- ▶ Who is the Medical Director of your MCA? When was that person appointed to the position?
  - ▶ How was that person chosen and appointed?
  - ▶ Does the Medical Director meet the qualifications for appointment? (Board Certified in EM, or as otherwise qualified per statute, below)
  - ▶ What formal role does the Advisory Body play in the appointment of the Medical Director?
  - ▶ Are there multiple or “deputy” medical directors appointed in your MCA? Have these additional appointments been approved by the Department?
  - ▶ How does the Medical Director, as an “agent of” the MCA, regularly report to the MCA Board on issues related to EMS?
- 

# MCA EVALUATION TOOL

## Medical Director:

- ▶ Has the Medical Director completed an education program for EMS Medical Directors, sponsored or approved by the Department, within one year of appointment?
  - ▶ Does the Medical Director participate at least once every two years in a Department approved educational program related to EMS medical control issues?
  - ▶ How does the Medical Director receive input from the Advisory Body?
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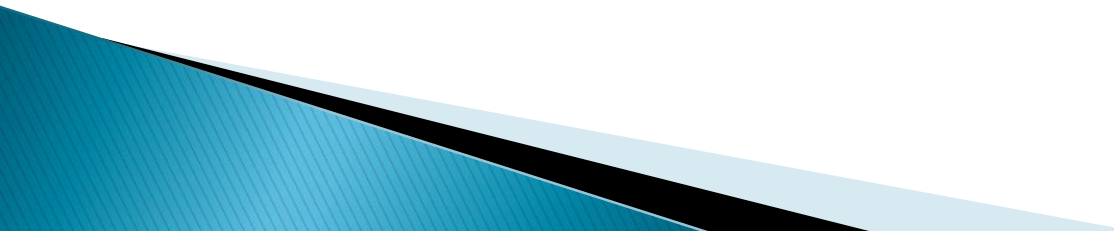
# MCA EVALUATION TOOL

## Granting of Medical Control, Due Process:

- ▶ Describe how your MCA holds Life Support Agencies “accountable” in the provision of EMS services.
- ▶ Is there a formal process in your State approved protocols to grant authority to operate to a Life Support Agency?
- ▶ Is there a formal process to grant authority to function as EMS personnel within your MCA?
- ▶ Describe the specific “process, actions, and sanctions” authorized by your MCA protocols to be used to hold a Life Support Agency or personnel accountable to the MCA?
- ▶ Is there a written, step-by-step, disciplinary process in place within the MCA system?
  - How does that process protect the “due process” rights of persons or Life Support Agency involved?
  - Is there a formal appeal process spelled out?

# MCA EVALUATION TOOL

## Granting of Medical Control, Due Process:

- ▶ How does your MCA assure that only those licensed individuals or agencies authorized by the MCA to provide patient care are functioning within the MCA's EMS system?
  - ▶ How does your MCA monitor the availability of each Life Support Agency?
  - ▶ How are hospital and FSOF leaders and staff made aware of MCA protocols that may impact their operations? Is there a formal procedure in place to assure that all hospitals within an MCA's geographic region adhere to MCA protocols that may pertain to them?
  - ▶ If there are multiple hospitals or FSOFs within the MCA, are there protocols defining which hospitals can provide on-line medical direction?
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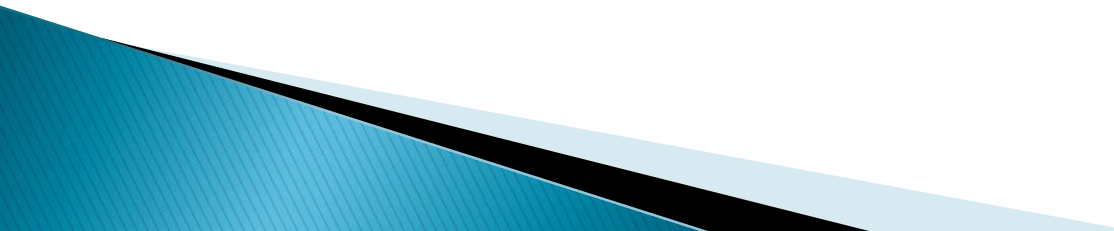
# MCA EVALUATION TOOL

## Granting of Medical Control, Due Process:

- ▶ Which personnel within the hospital or FSOF are authorized to provide on-line medical direction? (Physician, RN, etc.)
  - Any special training needed?
  - Any limits for some personnel?
  - Which personnel are authorized to order a deviation from written protocol?
- ▶ How does your MCA assure that Life Support Agencies are assessing the clinical competency of their staff before that individual provides patient care?
- ▶ If a hospital, or FSOF, in the MCA also operates or has a financial interest in a Life Support Agency, how does the MCA assure that its protocols or other policies do not unfairly impact other Life Support Agencies?
  - Are there “neutral safeguards” in place to assure disinterested determinations?

# MCA EVALUATION TOOL

## Protocol Development:

- ▶ Describe the protocol development and review process in your MCA.
  - ▶ Is there evidence of your MCA Advisory Body providing formal input to any proposed new protocol?
  - ▶ Are proposed protocols circulated in draft form, for comment, to all affected entities?
  - ▶ Are protocols formally adopted and implemented only after the local comment period, Department review and Department approval have been obtained?
  - ▶ Are approved protocols provided to hospitals, FSOs, and Life Support Agencies?
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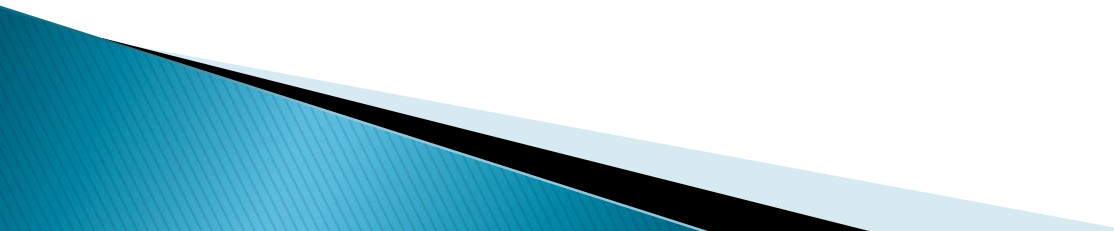
# MCA EVALUATION TOOL

## Protocol Development:

- ▶ Is the MCA involved in regulation of interfacility transfers, either wholly within or originating from within the MCA boundaries?
  - If so, are there approved protocols for this activity?
  - How are transferring physicians made aware of any limits or requirements of these protocols?
  - Does hospital staff understand the role of the MCA in interfacility transfers?
- ▶ Do agreements with other medical control authorities exist to allow for interfacility transfers that both begin and end outside of the “home” MCA of a Life Support Agency?

# MCA EVALUATION TOOL

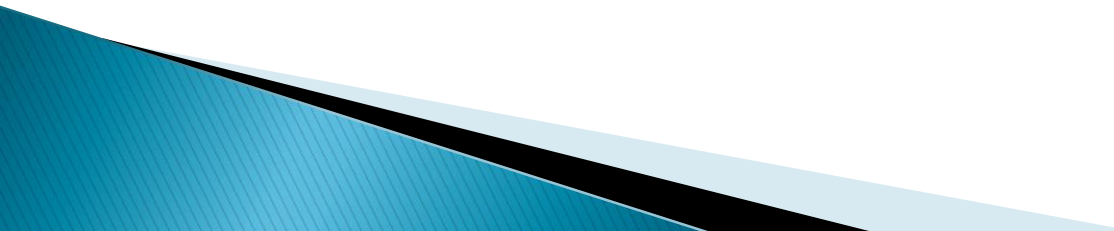
## Quality Improvement and PSRO:

- ▶ Does your MCA have a quality improvement program in place and functioning
  - ▶ Does the Quality Improvement program include a formal Professional Standards Review Organization?
  - ▶ What is the involvement of the Medical Director in the PSRO / Quality Improvement process?
  - ▶ How does your MCA make use of the local agency data collected by MDCH in the Image Trend system?
  - ▶ What is done with the data collected under that program from each Life Support Agency to improve quality of care within the system?
  - ▶ How does the MCA assure confidentiality of the collected data?
  - ▶ What type of confidentiality agreements exist at the PSRO level?
- 



# MCA EVALUATION TOOL

## Quality Improvement and PSRO:

- ▶ Are conflicts of interest identified and avoided within the PSRO process when possible?
  - ▶ Who comprises or staffs the PSRO function? (Hospital / MCA / Life Support Agency personnel)
  - ▶ How does your MCA assure that EMS Patient Care Report data is timely and fully reported to MDCH?
- 

# MCA EVALUATION TOOL

## Pharmacy:

- ▶ Does your MCA have written protocols detailing the “security, control, dispensing and exchange” of “pharmaceuticals, IV solutions, tubing and related apparatus”?
  - What needs to be under “lock and key”?
  - What items need only to be “secured”?
  - What does “secured” mean in your MCA protocols?
  - Are there written procedures to assure the temperature control of drugs and IV solutions? How is compliance verified?
- ▶ Is the exchange or initial dispensing of medication done only by a participating hospital pharmacy?

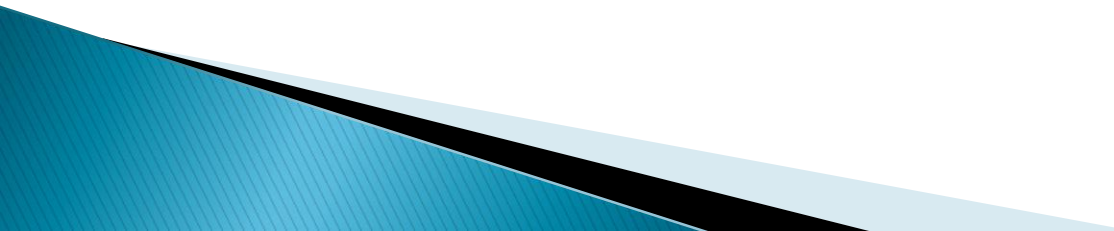
# MCA EVALUATION TOOL

## Pharmacy:

- ▶ Does your MCA specifically prohibit the use of prescriptions or other supply methods from outside the MCA structure as a means to supply medications to be carried on a life support vehicle?
  - How are the drugs and IV solutions and supplies carried by life support vehicles monitored to assure they were obtained only through the MCA process and not through an outside prescription, not obtained via the MCA process?
- ▶ How does your MCA assure that all “drugs and intravenous fluids” are “under the control” of a pharmacist that is affiliated with a participating hospital?
  - If there is more than one participating hospital or FSOF in the MCA, how do the pharmacy leaders of those h facility decide the issues related to control of drugs and IV fluids within your system?
  - Is there a common system, or does each hospital set its own procedures?

# MCA EVALUATION TOOL

## MCA Communication System:

- ▶ Who is responsible within your MCA for maintenance of records of communication with EMS providers?
  - ▶ How does your MCA assure that all communications between EMS units and hospitals are recorded?
    - Where are these communications recorded?
    - Who maintains that recording system?
    - Is access to those recordings limited to properly authorized staff?
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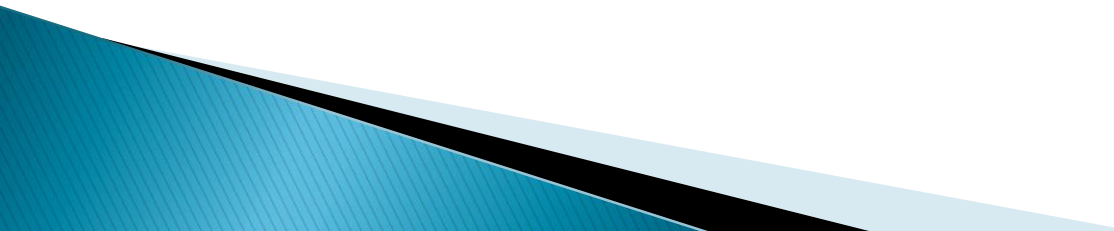
# MCA EVALUATION TOOL

## Participation in Related Activities:

- ▶ What is the involvement of the MCA in the local 911 Public Safety Answering Point(s)?
  - Does the leadership of the local 911 PSAP (Public Safety Answering Point) know and understand the statutory responsibility of the MCA regarding dispatch?
- ▶ Is the MCA actively involved in the provision of formal, medically directed “Emergency Medical Dispatch” systems used by the local 911 – dispatch system?
  - What role does the MCA play in the dispatch of EMS units within its geographic area?
- ▶ Is the MCA Medical Director actively involved with the local PSAP to develop and approve EMS dispatch standards?

# MCA EVALUATION TOOL

## Participation in Related Activities:

- ▶ How does the MCA encourage the concept of an “EMS System” within its geographic area?
    - Does the MCA actively encourage all participants to function as part of an overall system?
    - Are decisions made and protocols adopted that encourage “system” thinking, rather than individual agency actions?
    - Is the provision of EMS service uniform throughout the MCA geographic region, to the extent possible given local resources?
    - How does the MCA leadership work with local units of government to encourage an overall better EMS system?
- 

# MCA EVALUATION TOOL

## Participation in Related Activities:

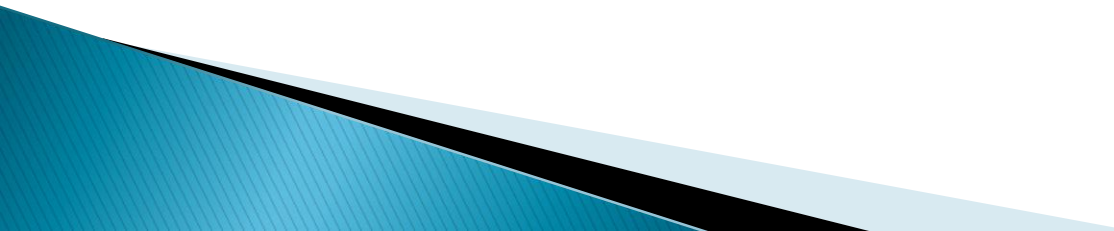
- ▶ Is the MCA involved on a regular basis with hospital planning for activities outside the hospital campus?
  - Does the hospital staff know the capabilities and role of EMS and the medical control authority in major epidemics?
  - Does the hospital staff know and understand the role of the MCA and EMS in regional trauma planning and care?

# MCA EVALUATION TOOL

- ▶ The following MCAs offered to complete the self-assessment (pilot):
  - Bonnie Kincaid, Oakland County MCA
  - Deb Detro-Fisher, Alpena County MCA
  - Bob Miljan, HEMS
  - Bruce Trevithick, Genesee County MCA
- ▶ These MCAs will provide information as to length of time to complete self-assessment.




# MCA EVALUATION TOOL

- ▶ Upon completion of the self-assessment pilot, information will be provided back to the MCA Subcommittee.
  - ▶ After this review, each MCA will be requested to complete their own assessment.
  - ▶ Length of time to complete will be based upon the pilot self-assessment.
- 

# MCA EVALUATION TOOL

## ► Purpose:

- MCA Self-evaluation.
  - Involve the MCA Advisory Body and Board
  - Involved Hospital Administrators
  - Assist MCAs in understanding requirements
  - Assist in meeting requirements
  - Eventually, the intent will be to use document and conduct peer reviews and determine if the MCA can meet the statutory requirements.
  - Looking to identify mentors that are interested in assisting MCAs
- 

# MCA EVALUATION TOOL

Questions?